Project Abstract

For the State of Michigan, almost half of all convicted offenders are from Wayne County (majority from City of Detroit) and more than half (55%) of paroled offenders return to Wayne County. Additionally, Wayne County (2 nd District) had the highest rates of murder, robbery, and aggravated assaults in the State of Michigan. The Michigan Reentry Initiative "Walk With Me" Project (MRI-WWM) will target Wayne County in efforts to protect public safety and reduce the rate of recidivism occurring among serious and violent offenders reentering that geographic area. The MRI-WWM project was developed by the Michigan Department of Corrections (MDOC) in partnership and collaboration with state and local law enforcement, the Family Independence Agency (FIA), substance abuse and mental health treatment facilities, community service agencies, churches, victims, and families of offenders to provide a reentry program that addresses the challenges of offender reintegration. Such challenges include public safety, recidivism, substance abuse, physical and mental health, employability and workforce participation, housing, family reunification, and restorative justice. The MRI-WWM is a program designed to utilize existing institutional, community, judicial, familial, and individual assets (resources) to promote the success of offenders sustaining productive citizenry during and after reentry into society. This program is designed to provide comprehensive services for offenders reentering society in a three phase process which includes:

- Phase One Going Home (Protect and Prepare -Institutionally-Based Programs);
- Phase Two Welcome Home (Control and Restore -Community-Based Transition); and
- Phase Three Staying Home (Responsibility and Productivity -Community-Based Long Term Support).

The MRI-WWM has an overall goal to protect public safety by reducing the rate of recidivism occurring among paroled offenders returning to Wayne County; to provide supportive services that will promote successful reentry to those offenders; and to increase the likelihood of productive citizenry. In order to achieve this goal, the program meticulously identifies eligible program participants and prepares them for successful reentry prior to release. The MDOC has an extensive offender database from which prisoner data can easily be targeted and tracked. Program participants in collaboration with correction institutions and the transition team will compile an Individual Reentry Plan (IRP). The IRP used as a "guide book" will provide the foundation for the provision of service delivery systems throughout all phases to ensure compliance and successful transition.

The MRI-WWM includes: Consequences of noncompliance with terms of the plan; Counseling on avoidance of criminal behavior and behavior triggers; Involvement of family and other natural support systems, including reunification plans when appropriate; Aftercare programs, including peer support groups following initial treatment; Restitution mechanism for the community at large, including community service and responding to victims concerns; training to improve job skills, and help gain and maintain employment or other means of support; Batterer intervention programs to address intimate and domestic violence; Educational services; Housing; Physical and Mental Health services; Interpersonal barriers, personal development/self esteem; and Substance abuse treatment including drug testing.

The MRI-WWM is expected to increase public safety, reduce the recurrence of crime, reduce recidivism, increase restitution, and increase productive citizenry among paroled offenders. To accomplish the goals and objectives of this initiative, reliance depends on a shared vision, mutual responsibility and respected commitment between the offender, institution and the community.

Project Narrative

1. Determine Problems to be Addressed

A. The Problem

The reality is that for this population, fewer than half of offenders released from prison, refrain from illegal activity or stay out of trouble for at least three years after their release date. Michigan Department of Corrections (MDOC) will collaboratively work with local, state, and federal entities involved in the Serious and Violent Offender Reentry Initiative to reduce and/or prevent the rate of recidivism occurring among offenders returning to Wayne County and improve the safety of citizens in direct and surrounding communities where offenders are returning.

According to data obtained from Michigan Department of Corrections Research Section, Wayne County is the geographic location paroled offenders return to the most often. Wayne County also has the largest urban population in the State of Michigan and is the locality where recidivism and re-offending occurs most frequently. The safety concerns of citizens in direct and surrounding communities where offenders are returning can be problematic if not properly addressed. Such problems that this Initiative will address are:

- Lack of education and employment options for returning offenders.
- Plans for restitution and restorative justice for victims and their families.
- Public safety for communities where parolled offenders are returning.
- Reduce and or prevent recurrence of serious and violent crimes.
- Lack of appropriate identification to obtain employment/needed services.

B. Analysis of the Population

Analysis of Michigan Department of Corrections data produced an initial list of 220 inmates who meet the criteria described in the federal Serious and Violent Offender Reentry Initiative request for proposals. Inmates are serious high-risk offenders, ages 18-35, with history of substance abuse who will be released to Wayne County. Over 82% of these inmates are African American, their average age is 28, and, on average, they have completed 10.4 years of education. However, it is believed that the functional level of this target group is considerably lower.

The Michigan Department of Corrections designated all 220 inmates as serious, high-risk, offenders. Most are serving time for violent and/or drug offenses. Many are serving time for multiple offenses. Approximately 86% have a history of drug abuse and 29% have a history of drug and alcohol abuse. In addition, 15.5% have a history of mental health problems. These offenders tend to lack stable work histories, meaningful family support, and they live in economically depressed communities. In essence, they face numerous social, economic, and interpersonal barriers to successful community reintegration.

Upon release from prison, serious, high-risk offenders with these demographic characteristics pose a potential concern for community safety, because they may commit new crimes than any other inmate population. Furthermore, the majority of these inmates will return to low-income minority neighborhoods in the city of Detroit, that already experience a disproportionate percentage of criminal victimization.

Successful reentry outcomes for this population will improve the quality of life in their communities. More important, successful reentry outcomes for these offenders will have a tremendous positive impact on public safety in the most depressed and crime-ridden neighborhoods in Detroit and Wayne County Michigan.

Over half of the convicted offenders (55%) from the state of Michigan are paroled back to Wayne County (the greater percentage are from the City of Detroit). Additionally, Wayne County has the highest rate of murder, robbery, and aggravated assaults in the State of Michigan. The Michigan Reentry Initiative "Walk With Me" Program (MRI-WWM) will target offenders who release back to Wayne County in an effort to protect public safety and reduce the rate of recidivism occurring among serious and violent offenders reentering that geographic area.

Using a collaborative initiative between Michigan Department of Corrections, City of Detroit, Wings of Faith, Inc. and local human resource agencies, the program endeavors to work with offenders before, during and after their parole to reduce barriers to their success. The MRI-WWM Program will assist in meeting the economic, social and physical needs of the parolees.

The MDOC's Field Operations Administration (FOA) performed a screen on persons who fit the target population of 18 – 35 year olds who are serious/high risk

offenders with a high likelihood of parole to Wayne County. Upon assessment of a computer-generated screening of persons who meet this criteria, MDOC identified a total of 2,198 individuals eligible to participate in the program. These individuals were identified and listed according to date of birth, type of offense, number of felonies, prison terms, probations, history of drug abuse, and history of mental health illness.

MDOC determined this population to be serious offenders utilizing comprehensive assessments such as the Security Classification Screen, Property Risk Screening Tool, Assaultive Risk Screening Assessment, and the Substance Abuse Subtle Screening Inventory (SASSI). These assessment factors coupled with static and dynamic factors allow accurate analysis of the highest risk populations.

The MRI-WWM program can serve approximately 1,100 to 1,350 parolees.

There are over 10,000 persons paroled each year in the State of Michigan and more than half of those persons return to Wayne County. Of the number of paroled offenders, approximately 37% of them are serious and violent. Based on the maximum number of offenders this program can serve and those who receive parole, an estimated 500 offenders will enter into Phase II.

The identified barriers for this program are potential last minute changes in parole location (paroling to somewhere other than Wayne County); prisoners failing to meet parole requirements and ineligibility to attend due to programming and/or security concerns. It is hoped that MDOC's screening process will eliminate as many of these barriers as possible.

2. Determine Goals and Objectives

The MRI-WWM Program has outlined the following project goals and objectives: Goal 1: To reduce recidivism and or the recurrence of violent and other serious crimes.

Objective 1.1: On July 01, 2002, begin the reentry planning process within the correctional setting, which includes notifying at least 500 eligible offenders,

establishing individual reentry plans (IRP) for at least 500 eligible offenders, and initiating contacts with the transition team.

Objective 1.2: During Phase 1 of the MRI-WWM occurring July 01, 2002 - June 6, 2003, ensure that the offender is fully engaged in the planning process and clearly understands the expectations and consequences.

Objective 1.3: During Phase 1 and 2 of the MRI-WWM occurring July 01, 2002 – May 22, 2004, identify needs and provide supportive services designed to promote successful reentry for a minimum of 250 adult offenders.

<u>Objective 1.4</u>: During Phase 2 and/or 3 occurring July 2003- May 2005, exercise active supervision of at least 250 paroled offenders through electronic monitoring devices, ensuring accountability and/or appropriate graduated sanctions for noncompliance or criminal behavior.

Goal 2: To enhance public safety.

<u>Objective 2.1</u>: During Phase 2 and 3, work with local law enforcement and the parole board to ensure joint supervision and accountability for at least 250 paroled offenders returning to Wayne County.

Objective 2.2: During Phase 2 and 3, provide active ongoing case management and supervision for at least 250 paroled offenders.

Objective 2.3: During phase 2 and/or 3, utilize electronic monitoring to ensure the appropriate location of 250 paroled offenders and provide continuous monitoring. Objective 2.4: During Phase 1, 2, and 3, exercise zero tolerance for new criminal activity.

Objective 2.5: During Phase 1, develop and implement individual reintegration plans for at least 250 young adult and adult offenders with appropriate levels of supervision.

Goal 3: To re-deploy and leverage existing community resources by fostering

linkages and accessing currently provided services.

Objective 3.1: During Phase 1, 2, and 3, use United States Department of Justice and Office of Justice Programs funds to design, build, test, and improve the reentry system that provides ongoing resources for the MRI-WWM program to maintain program sustainability.

Objective 3.2: During Phase 1, 2, and 3, utilize U.S. Department of Justice and Office of Justice Programs funds to enhance existing state and or local resources.

Objective 3.3: During Phase 2 and 3, increase communities' leveraging and allocation of resources to provide for program sustainability.

<u>Objective 3.4</u>: During all phases of the reentry initiative, enhance governmental and community partnerships to increase availability and quality of reentry services.

Goal 4: To assist the offender to avoid crime, engage in pro-social community

activities and meet family responsibilities.

Objective 4.1: During Phase 1, 2 and 3, promote productive engagement between the offender, institution and community organizations through a team management approach.

Objective 4.2: During Phase 2 and 3 of the reentry program, provide for and expect the offender to be a contributing productive citizen including restorative justice.

Objective 4.3: During Phase 1, 2, and 3, increase involvement between members of offenders support networks and returning offenders.

Goal 5: To ensure program sustainability.

Objective 5.1: During Phase 1, 2, and 3, ensure that current community and government resources are utilized and will remain accessible for program sustainability.

<u>Objective 5.2</u>: During Phase 1, 2, and 3, ensure that existing government and community support is enhanced and work to build upon established and or current relationships.

<u>Objective 5.3</u>: During Phase 1, 2, and 3, ensure that this reentry initiative is viewed as integral to community and public safety through public relations and community liaisons.

Approximately 40% of MDOC prisoners come from Wayne County, MI, where there is strong support from the Detroit Community and many resources available to retool inmates for the workforce. The high population of ex-felons concentrated in Wayne County correlates to the large percentage of agencies and the city government initiatives that currently service our target population through jobs, training, and social skills. A primary goal of this grant is to bring these services to the participant where they might not otherwise know they exist or are unable or unmotivated to contact the service agencies.

3. Select Target Populations/High-Risk Offenders

This project targets 18-35 year-old serious, high-risk offenders currently incarcerated in a MDOC prison or camp. These offenders intend to return to Wayne County, Michigan upon their release from prison. In addition, the overwhelming majority of these inmates will return to the city of Detroit, the largest city in the state, and the location for Phase II of the proposed reentry program. It is expected that these offenders will return to Wayne County under the supervision of the MDOC Parole Authority.

a. Approach

· Defined target population

The target population is 18 – 35 year olds who are serious/high risk offenders and have high probability of substance abuse paroling to Wayne County. This population does not include sex offenders.

Classification/Reclassification

Specifically, MDOC determined this population to be serious offenders utilizing comprehensive assessments such as the Security Classification Screen, Property Risk Screening Tool, Assaultive Risk Screening Assessment, and the Substance Abuse Subtle Screening Inventory (SASSI). These assessment factors coupled with static and dynamic factors allow accurate classification and reclassification of offenders. Examples of both include: Static Factors - age at first arrest; gender; prior supervision; mental health; current offense; substance abuse; marital status; education level; past employment; past gang affiliation; and criminal peer groups. Dynamic factors - current age; current education level; current marital status; prison class level; prisoner conduct; current employment; financial assistance; residency; and treatment.

Estimated Release Date

Due to the nature of this population, it is highly likely that they have previously been denied parole. Therefore many have remained incarcerated beyond their Earliest Release Date (ERD). In order to promote program success, MDOC will identify offenders who can participate in the program for at least 12 months and who have a high likelihood of release (parole) between July 1, 2003 and October 31, 2003.

Offender Participation

Offenders will participate in this program because many of them who parole to Wayne County recognize the need for committed support services and reinforced systems necessary for successful community reintegration. This program would provide the opportunity to reenter into the community and receive support in meeting the challenges of physical/mental health illness, substance abuse treatment, employment, housing, and family reunification/relationships. The repeat offender generally knows the areas of weakness in the home, community, and workforce that brought him back into the system. He/she may not always know how to find appropriate community support and this will be provided through the MRI-WWM Program.

All eligible offenders will be given the opportunity to apply for the program. Eligible offenders will apply for enrollment in the program by preparing and submitting an application letter to appropriate correctional facility staff. In their application, offenders answer the following questions:

- ▶ Why do you believe you need support services upon release to your community?
- ▶ What specific areas do you think you need the most assistance?
- ➤ Why are you ready and willing to participate in the program?
- ➤ Indicate whether you have participated or completed a pre-release program. If so, what were the benefits of the program?
- ► How do you expect you will benefit from the program?
- Explain how you are willing to abide by the rules of the program?
- · Justification of Sample Size

The participants were identified via data collected through a departmental database search. MDOC determined this population to be serious offenders utilizing comprehensive assessments such as the Security Classification Screen, Property Risk Screening Tool, Assaultive Risk Screening Assessment, and the Substance Abuse Subtle Screening Inventory (SASSI).

The first query submitted indicated only 220 participants were identified as eligible for the program. This number was not reflective of prisoners who are parole violators, new sentence, parole techs, and those denied parole. A second query was conducted and is inclusive of these individuals that meet the target population and eligibility criteria for the program. This query coupled with appropriate assessment factors produced a total of 2,198 offenders who are eligible for the program. This number will be narrowed down when eligible participants do not submit an application and enroll in the program.

It is estimated that of the 2,198 eligible persons, less than half of them will successfully complete the institutional phase of the program and be granted parole. During Phase I, approximately 1,100 – 1,350 persons will complete, but only about 37-41% of them will receive parole and advance to Phase II.

During Phase II, a minimum of 500 paroled offenders will advance to this phase and it is estimated that at least half (250) of those paroled offenders will advance to Phase III. This number (250) takes into consideration that there will be participants who fail the program and return to prison. During Phase III, 150 participants will have successfully completed all Phases of the program and reentered into society as productive citizens. Again, this number (150)

takes into account that there will be participants who fail the program and return to prison.

a. Action steps required

The population eligible for this program will be determined through a four step screening process. First, participants must meet MDOC screening requirements including: they must be slated to parole to Wayne County, Michigan; they will complete an application to the housing staff for further screening based on prisoner behavior and probability of parole utilizing appropriate screening tools; and final approval for participation will be determined by the Central Office Education Manager and must be received for evaluation twelve months prior to release.

b. Timeline

Tasks	Months	Months 2				6	7	8	Assigned Responsibility
Tusks									

1. Finalize analysis of number and characteristics of high risk offenders projected to return to Wayne County				FOA staff/School Principals
2. Review proposed criteria and process for selecting eligible participants				MDOC Education Manager/Parole Board
3. Finalize selection criteria, risk assessment instrument, and selection process				MDOC Education Manager/Prison Administrator/Prison School Principals
4. Review and accept submitted applications				MDOC Education Manager/ School Principals
5. Development of Reentry Plan				School Principals/ MDOC Staff/ Transition Team
6. Implementation of Reentry Plan				School Principals/ MDOC Staff/ Transition Team

c. Person(s) responsible for completion

Julie DeRose, MDOC Education Manager

Barbara Bock, Regional Prison Administrator/Prison Liaison

Constance Banks, School Principal and Andrew Jackson, Warden at Mound Correctional Facility

Michele Dick, School Principal and Clarice Stovall, Warden at Western Wayne Correctional Facility

Diane Meyers, School Principal and Thomas Phillips, Warden at Cooper Street Correctional Facility

Lee McKenzie, School Principal and Joan Yunkins, Warden at Camp Brighton Correctional Facility

Joe Hulverson, Acting Principal and Jimmy Stegall, Warden at Macomb Correctional Facility

4. Determine Organizational Capacity/Decision-Makers

A. Lead Agency

All adults and juveniles sentenced as adults and convicted of felonies for which the statutory maximum is more than one year can be sentenced to the state's prison system, which is under the jurisdiction of the Michigan Department of Corrections (MDOC). MDOC being the lead agency for this reentry program and one of the principal state departments will provide an array of systems that include prisons, community supervision, substance abuse services, and labor and human resources. In the State of Michigan under the jurisdiction of MDOC, there are 42 prisons and 10 camps with a total of 47,924 prisoners. MDOC with the assistance of local law enforcement agencies includes programs such as:

- STOP II (Short Terms of Punishment) a monitoring program that
 combines drug testing with immediate sanctions for those testing positive;
- Night Hawk and Fox Watch special monitoring programs for targeted
 offenders who have previous gang affiliation, are sex offenders, have been
 convicted of assaultive crimes or have special conditions that require onsite
 supervision such as curfews or prohibition against drinking alcoholic
 beverages;
- The satellite tracking pilot a new technological tracking system that observes the movement of parolee on a map of an area;
- Michigan Crime Victim Notification Network automated system that allows victims and the general public to locate offenders in a county jail or a state prison and obtain other basic information in addition to automatic telephone notification to victims when an escape, discharge by court order, release on bond or apprehension occurs;

- Community Service Prison Build which teach prisoners work skills to build homes for low income families to achieve homeownership while steering prisoners toward productive lives after release;
- Restoring Justice with Community Service work of offenders is divided into community service-performed as a part of a criminal sentence, and public works, which is done by prisoners as a work assignment and a way to reduce prisoner idleness while helping the community;
- Resident Substance Abuse Treatment program a comprehensive program
 of substance abuse testing, sanctions, prevention, treatment and aftercare;
- Education programs- provides formal education such as Adult Basic
 Education (ABE), career and technical education, and General Educational
 Development (GED);
- Health Care and Mental Health Services provides medical, dental, and mental health services to prisoners.

A. Local Readiness

MDOC has partnered with local decision makers to assist in planning, implementation and service delivery for paroled offenders enrolled in the MRI-WWM.

Decision Maker	Agency/Individual	Role/Responsibility	
Chief Elected Official	City of Detroit Mayor	New Source of Support/Existing Resources-	
		Dedicate Office of Faith-Based and	
	Kwame Kilpatrick	ck Community Initiatives to oversee the faith-	
		based mentoring component of the program.	
Chief Judge of local	36 th District Court	Existing Resources - Provide court	
community judiciary	Judge Timothy Kinney	authority to impose sanctions on paroled	
		offenders.	
Head of local	Wayne County Dept of	New Source of Support/Existing Resources.	

community	Community Justice	
corrections agency	Jeriel Heard	
Chief law enforcement officers	Detroit Police Dept. Chief Jerry Oliver	Re-deploy – monitor paroled offenders, impose sanctions and encourage public
	Wayne County Sheriff's Dept. Sheriff Ficano	safety.
Local prosecutor	Wayne County Prosecutor's Office Mike Duggan	New Source of Support
Chair of local Workforce Investment Board	Detroit Workforce Development Board John Bozella	New Source of Support - Will support efforts to develop employment opportunities for program participants.
Head of local Workforce Agency	Detroit Employment Training Department Cylenthia LaToye Miller, Esq.	Existing Resources - Encourage full cooperation by all workforce development resources, including the five One-Stop Career Centers operating in the City. Will also support the alignment of the City's career preparation and training systems with the occupational training and work readiness programs operating in the prisons.
Head of local substance abuse agency	Detroit Health Department Bureau of Substance Abuse Dr. Calvin Trent	Existing Resources – Provide referrals for substance abuse testing and treatment.
Head of local mental health agency	Community Mental Health Karen Shrock	Create New Resources/Existing Resources
Head of local education agency	Detroit Public Schools Adult Education Dr. Kenneth Burnley	Existing Resources
Official of local college	Wayne County Community College District Dr. Curtis Ivory	Existing Resources
Head of local faith based organizations	City of Detroit Wanda Bostic	Create New Resource/Existing Resources – Expand community initiatives.
Head of local community organizations	Wings of Faith, Inc. Rev. Dee Dee Coleman	New and Existing Resources- Community liaison and comprehensive community services. (Community Reentry Authority)

B. State Readiness

MDOC has partnered with state decision makers to assist in planning, implementation and service delivery for paroled offenders enrolled in the MRI-WWM.

Decision Maker	Agency/Individual	Role/Responsibility
Head of State adult	Michigan Department	Existing Resources – Dedicate resources
correctional agency	of Corrections	and departmental support of the program
Head of State parole	Michigan Department	Existing Resources – Give positive
board	of Corrections/Field	consideration to those prisoners involved
	Operations	in the program
	Administration (FOA)	
Head of State	MDOC Bureau of	Existing Resource – Provide substance
substance abuse	Health Care	abuse services to participants
treatment agency		
Head of State mental	Michigan Department	Existing Resource—Support MDOC effort
health agency	of Community Health	in providing services to participants.
Head of State	Michigan Department	Existing Resource – Will support efforts
Workforce agency	of Career Development	to enhance local capacity to provide
	Dr. Barbara Bolin	employment services to ex-offenders.
Head of State police	Michigan State Police	Existing Resource/Re-deploy – impose
		sanctions and encourage public safety.
Head of State	Community Treatment	Create New Resource/Existing Resource
Transitional/Residential	Centers, Inc.	 comprehensive and diverse therapeutic
Housing	Carmen Rembert	services including housing to individuals
		of the criminal justice system.
State Family	Michigan Family	Existing Resources – Designate site to
Independence Agency	Independence Agency	provide services for participants needing
		assistance.

MDOC has coordinated a system that ensures linkages and integration of direct services between local and state decision makers. Such a coordinated system will provide interagency staffing and information management systems between MDOC, the Community Reentry Authority and Detroit Employment and Training Department.

a. Approach

MDOC will collaborate with all state and local key decision makers as necessary (including Representatives from the Michigan Crime Victims

Services Commission) and community agencies to promote productive planning (strategic planning) for this Reentry Initiative. The productive planning process will focus on the most critical problems, choices and opportunities.

With strategic planning, MDOC will be able to resolve interrelated sets of issues or problems in an intentional and coordinated manner with groups involved.

b. Action steps required

Required action steps of strategic planning will be:

- ➤ Getting Organized: Select steering committee to keep planning on track; Outline the planning process for the Michigan Reentry Initiative; Get commitment to proceed.
- ➤ Taking Stock (Situation Analysis): Gather necessary background information; review past, present, and future situation; identify key issues or choices.
- > Setting Direction (Vision, Draft Plan): Critical issues approach, goals approach, alignment approach; Develop first draft of plan.
- > Refining and Adopting Plans: Review and refine plan, adopt the plan.
- > Implementation of Plans: Implement the plan, monitor progress, make adjustments, and periodically update the plan.

Additionally, several principals will be utilized:

- ➤ Building social capital: Bring key stakeholders together in purposeful activities that reveal shared values, strengthen social connections, and build trust.
- > Strengthen civic infrastructure: Actively engage "mediating institutions" such as religious congregations, social clubs, and service groups in improving the community. Improve government and intercommunity cooperation.
- ➤ Mobilize community assets: Actively engage "mediating institutions" such as religious congregations, social clubs, and service groups in improving the community. Improve government and intercommunity cooperation.
- ➤ Collaborate: Effectively combine community strengths to achieve shared goals.
- Act based on vision: Many ideas and effective action steps to protect public safety and reduce recidivism will come out of greater civic connection, increased civic skill, and shared values.

c. Timeline

Tasks	Wee	eks	2	3	4	5	6	7	8+	Assigned Responsibility
Select Steering Committee										MDOC Prisoner Education Manager/Wings of Faith, Executive Director
Outline Planning Process										Steering Committee
Develop Draft of Plan										Steering Committee/All Partners
Review and Refine Plan Adopt the Plan										Steering Committee/All Partners
Implementation of the Plan										MDOC/WOF/All Partners

d. Person(s) responsible

Persons responsible for strategic planning and staff management for collaboration of multi-system programs will include a team of individuals.

Julie DeRose, Prisoner Education Manager from Michigan Department of Corrections; Barbara Bock, Warden – Michigan Department of Corrections; Reverend Deotha "DeeDee" Coleman, Executive Director for Wings of Faith, Inc.; Tiffany Joshua, Corrections Liaison/Resource Coordinator for Wings of Faith, Inc.; and Anthony King, Community Reintegration Consultant for Wings of Faith, Inc. (Please see attached resumes)

This strategic planning team has extensive experience and expertise in multiple areas so that complimentary and productive planning is successful. Michigan Department of Corrections (Institution) and Wings of Faith, Inc. (Community) are critical components to successfully implementing this initiative to ensure protection of public safety and reduction in recidivism among serious and violent offenders.

a. Append MOUs and protocols

A Memorandum of Understanding (MOU) from key stakeholders and decision makers has previously been submitted. Copies of MOU's were with initial grant application.

5. Program Design and Management

A. Authority and Coordination/Project Management

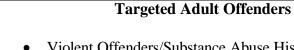
The model below outlines each phase of the MRI-WWM, the corresponding authority for each phase, and its coordination/project management.

Phase I: Institutionally-Based Program

Authority: Michigan Department of Corrections

Pre-Organizational Planning

- Identify accountability among MDOC staff involved in the program
- Orientation of school principals/staff for prison



- Violent Offenders/Substance Abuse History
- Estimated Release Date 7/1/03-1/1/05
- 18-35 year olds
- Releasing to Wayne County

1-9 months

Phase I: Protect and Prepare

- Housed at WWF, NRF, MCF, JCS, and CBI
- **Initial Orientation**
- Intake/Assessment

Risk and Needs Assessments

- Formulate and Involve Transition Team
 - i.e. Mental Health, Substance Abuse, & Family Reunification
- Develop Individual Reentry Plan (IRP)

Conditions of Release

Goals and Objectives

Implement the IRP

Proceed with active strategies to complete IRP

Correctional Facilities/Locations

WWF-Western Wayne, Plymouth

NRF-Mound, Detroit

MCF-Macomb, New Haven

JCS-Cooper Street, Jackson

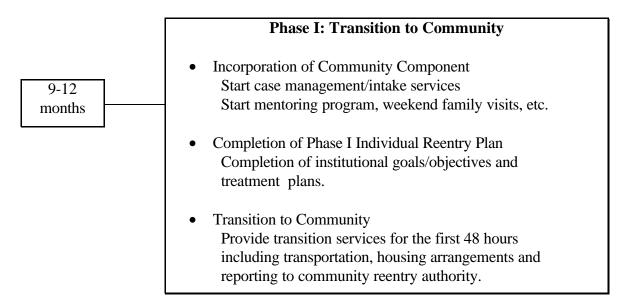
CBI-Camp Brighton, Pinckney

Supervision Level

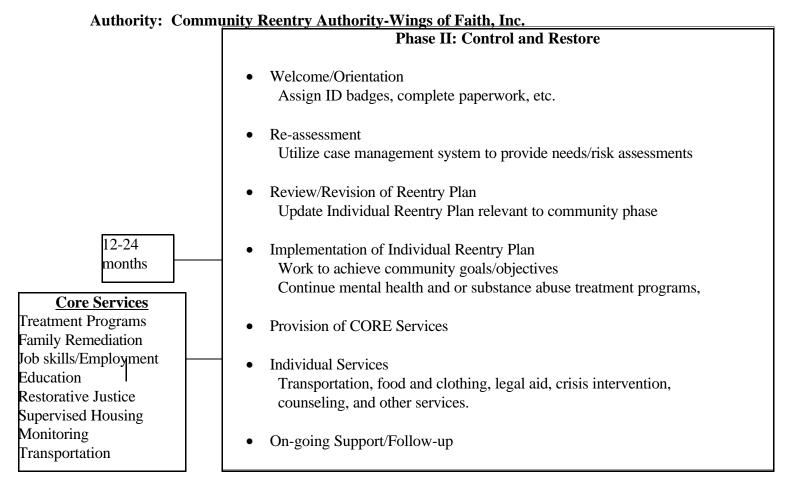
Conditional Release from Prison Referral to MDOC by Parole Officer

Phase I: Combined Institutionally-Based and Community-Based Program

Authority: Michigan Department of Corrections/Wings of Faith, Inc.



Phase II: Community-based Program



Phase III: Community-Based Long Term Support

Authority: Community Reentry Authority - Wings of Faith, Inc.

Phase III: Responsibility and Productivity Routine/Quarterly Case Management Aftercare Treatment Services Continued Mentoring Program Continued Linkages to Community Resources Residency in the Community Full/Part Time Employment Involvement in Stable Family Relationships Involvement in Civic and Social Activities Involvement in Schooling, Vocation, and or Job Training Reinforcement and Sustainability

Phase I (Months 1-9) Going Home:

This phase will target the assessment and reclassification of offenders, selection of eligible program participants, development of individual reentry plan (IRP), assignment of management team, and implementation of the IRP. MDOC has a comprehensive network of programs to provide for Reentry Initiative participants based on identified needs in education, mental health, substance abuse, life skills, and personal development. Included in this component will be the BRIDGES Program - a curriculum for participants who have multiple barriers for acquiring and sustaining employment.

<u>Phase I (Months 9-12) Going Home Transition</u>:

This phase is integral to the seamless transition approach for paroled offenders reentering back into society. The transition team will work closely with the MDOC Management Team to assist the offender with needed services such as mentoring, family reunification, supervised housing options, and acquisition of valid identification documents (state I.D., Social Security card, etc.).

Phase II (Months 12-24) Welcome Home:

The Community Reentry Authority (Wings of Faith, Inc.) is essential to the success of this phase of the program. Based on an intensive assessment by the management team of each ex-offender, the Reentry Initiative participant will be referred to appropriate services available through Wings of Faith, the Community Reentry Authority. Located inside the Samaritan Center, (the largest faith-based one stop facility in the world) Wings of Faith, Inc. (WOF) has been instrumental in securing partners to provide a coordinated system of services for ex-offenders, current and recovering substance abusers, high risk youth, aging/elderly, unemployed, and many others. WOF will have the

authority and ability to impose graduated sanctions if a paroled offender does not comply with reentry plan. To ensure authority of the community reentry agency, WOF will contain interagency staffing and case managers to supervise, track progress, and impose conditions of the reentry plan for paroled offenders. WOF is also the community liaison and contact for the coordinated system of services that includes medical, youth, family, community, adult, senior citizen, and faith-based programs.

Additionally, services are accessible at one of the other One-Stop Center locations through out Wayne County if it is geographically closer to approved residence for the paroled offender.

Phase III (24-36): Staying Home

This phase of the program will continue the supportive services to address specific needs of paroled offenders such as relapse prevention, mentoring and counseling. It will also promote continued support of community and community-based organizations including faith based groups to promote sustainability for reentry efforts. This phase will also provide the paroled offenders with a community resource manual to promote ongoing community support.

Program Overview of MRI-WWM for Offenders

Program Overview of MRI-WWM for Offenders										
Phase I: Going Home-	Phase II: Welcome Home-	Phase III: Staying Home-								
Institution (0-9 months)	Community (12-23 months)	Long Term (24-36 months)								
Expected Outcome: 500	Expected Outcome: 250	Expected Outcome: 150								
offenders complete	offenders complete	offenders complete								
1. Pre-organizational Planning	1. Initial Reception	1. Continued Involvement &								
Identify accountability among	Community Reentry Authority	Community Support								
MDOC staff involved in the	performs initial contact and	Paroled offenders receive								
program.	intake with paroled offender	community resource manual								
	within 24 hours of release.	and ongoing access to								
Orientation of school		resources of Michigan Works!								
principals for prison.	2. Plan Revision &	Centers.								
	<u>Modification</u>									
2. Participant Selection	Offender works with transition	Continued supportive services								
Reclassification	team to review IRP and revise	and treatment as needed.								
Assessments (Risk and Needs)	if needed.									
,		On-going involvement of								
3. Transition Team	Continued substance abuse and	community-based								
Development & Organization	mental health treatment	organizations.								
Identify and formulate	services									
transition team based on needs		Actualization of Reentry Plan.								
of offender. Transition team	Development of timeline to	Č								
may include treatment	complete goals and objectives.									
providers, corrections staff,										
law enforcement officials,										
employment trainers, and										
mentors.										
4. Development of										
Individual Reentry Plan (IRP)										
Includes institutional,										
transitional, and sustainability										
goals.										
5. Implementation of Phase I:										
Basic needs										
Support Services										
Restorative Justice										
	3. Approval of									
	Individual Reentry Plan (IRP)									
	Community Reentry Authority									
	approves and formalizes IRP.									
	.									

	4. Ongoing Assessment Regularly scheduled case management and transition team reviews for progress tracking and goal attainment.	
	5. Authority Reviews Community Reentry Authority provides supervision and regularly reviews progress and compliance.	
	6. Progress to Independence Community Reentry Authority reviews and adjust IRP for Phase III.	
Phase I (9-12 months) 6. Transition Phase Overlap of institution and community phase.		
Mentoring services, family remediation and identification acquisition.		

B. Service Delivery Systems

A Reentry Workgroup was formed in March 2002 that was comprised of representatives from local and state agencies to address the issues of reentry for paroled offenders in Michigan. This workgroup is involved in the Reentry Initiative and will play an active role through the whole process in providing services and implementing effective strategies. Service delivery for Phase One is primarily provided by MDOC. The last quarter of Phase One (months9-12) will involve staff from the community phase to improve the transition for offenders.

Partners involved for service delivery in Phases Two and Three include the Michigan Department of Corrections, Community Reentry Authority Wings of

Faith, Inc, Detroit Employment and Training Department, and Community Treatment Centers, Inc.

The MDOC Career Technical Education Unit and Detroit Employment and Training Department will work together to ensure training opportunities provided in the institutions are preparing offenders for existing employment opportunities in the Wayne County area. MDOC, Community Treatment Centers, Inc. and many other service providers will work together to ensure that employment, substance abuse and mental health treatment, and housing are provided for offenders reentering back into society. The Reentry Initiative Transition Team will be provided with information on all One-Stop Career Centers and other workforce development services and will be familiarized with the required eligibility requirements. It will also receive training on how to refer riders to the "transportation to work" services available through the One-Stop system's mobility management offices.

The community component is designed to slightly overlap Phase One, provide intense interventions for Phase Two, and continue support and sustainability in Phase Three. Phase One: Protect and Prepare: Wings of Faith, Inc. (WOF) the community reentry authority will start community interventions in months 9-12 of Phase One. Interventions will include selection and assignment of mentors, family visitation and support, coordination of community resources with Individual Reentry Plan, counseling, and other needed services to assist in the transition from commitment to community. This component will also include creating intake files and identification badges for program individuals. Phase Two: Control and

Restore (12-24 months) WOF will immediately work with offenders following their release from the correctional institution. WOF has agreements with courts and local law enforcement officials to impose conditions of the reentry plan, and graduated sanctions, which may include recommended revocation of release with agreed upon conditions. WOF will work collaboratively with corrections officials in the institution to monitor the offender's participation in and cooperation with supervision expectations, treatment programs, job skills, work readiness opportunities, education, and victim or community restitution efforts.

Additionally, WOF will actively involve support systems such as family and community-based organizations and collaborate with social service agencies, community supervision authorities, law enforcement, and other programs based in the offender's neighborhood to address issues identified in the reentry plan. The types of services provided in this Phase include, education, monitoring, mentoring, life skills training, assessments, job skill development, family support/reunification, substance abuse treatment/testing, and mental health treatment.

Additional services provided are staff development and training (train employees, businesses, and public service entities about reentry and the importance of their role in the process), community education (educate citizens, neighborhoods, and communities about reentry and the importance of accepting and working with reentering offenders), and communication liaison (maintain communication and link between Michigan Department of Corrections and the public).

During Phase Two and Three, a valuable service is transitional housing for offenders needing that service. Community Treatment Centers, Inc. provides

transitional housing and residential housing for offenders needing substance abuse services. The mission of Community Treatment Centers is to provide a transitional housing program designed for men and women who are being released from prison that have demonstrated more personal responsibility for their behavior and recovery. Goals are to: assist the successful reintegration of program participants back into the community by providing assistance towards independent living; to reduce the incidence of recidivism and relapse for individuals who have completed incarceration and/or substance abuse treatment programming; to create collaborative community relationships that link program participants with needed resources; to provide temporary safe, drug and alcohol free affordable housing for men, women, and families that encourages successful re-entry into the community; and to support reentry, recovery, substance abuse treatment, mental health services, employment and education program by providing and maintaining safe affordable housing.

Participants are expected to require less support and supervision, however those needing more intensive supervision will require coordinated efforts between transitional housing staff and case management. The Parole officer is also crucial in this aspect of supervision. Individuals will be housed in transitional housing owned or leased by agencies, including Project Rehab. MDOC is in the process of working with other housing agencies and authorities to increase the amount of housing options for offenders in the reentry program.

C. Transition Team

The transition team is comprised of local and state law enforcement officials, community groups, schools, substance abuse and mental health treatment providers, training centers, employers, victims advocates, and human service and faith-based organizations. The transition team will vary depending on the parolee's needs and will address the multi-faceted components of the Individual Reentry Plan. Please see attachment detailing transition team components.

D. System of Offender Assessments

MDOC provides classification/reclassification and assessments based a Policy Directive guided by the Reception Facility Services. The Reception facilities receive, house and provide intake processing for prisoners sentenced to the Department's jurisdiction pursuant to the Holmes Youthful Trainee Act (HYTA, returned due to parole violation, reclassification from Community Residential Programs (CRP) or the Special Alternative Incarceration Program (SAI) facility, or returned from escape status. The Reception Facilities Services has a team composed of trans-case writer, Bureau of Health Care Services Psychological Services Staff, Security Classification Director, and Education Assessment Services. The MDOC has a Policy Directive for the following areas:

 Prisoner Program Classification/Reclassification – programming needs, interests, and abilities of prisoners in Correctional Facilities Administration (CFA) institutions shall be identified and matched to the needs and resources of institutions which includes Initial Program Classification, Classification Review, Reclassification, Work/School Assignments, and Performance Evaluations;

- Diagnostic Assessment of Correctional Residents policy for diagnostic evaluation of correctional residents at time of entry into the system and for the documentation of program participation. All persons committed to the MDOC will be provided with a comprehensive diagnostic needs assessment to determine their level of academic development and proficiency, vocational aptitude and interests, and general personality make-up. Detailed assessment is necessary to match individual with appropriate institutional security levels as well as program availability, and to identify behavior characteristics requiring therapeutic intervention;
- Prisoner Security Classification classification policy for Screening of Incoming
 Prisoners, Security Classification Review, Determining Security Level, and
 Program Classification in Relationship to Security Level; and
- Prisoner Placement and Transfer policy directive for Transfer Screening and Authorization, Secure Level I Institutions, Camp Placement, Special Problem Offender Notification (SPON), and Housing for Prisoners With Disabilities.

 Assessment tools used for and or during policy directives measure risk principles such age at first conviction, number of prior convictions, severity of prior convictions, history of childhood abuse/neglect, history of substance abuse, and history of education, employment, family and social failures. Additional assessments will include the needs assessment and the responsivity principle. The needs assessment will identify substance abuse challenges, educational deficiencies, vocational deficiencies, mental health issues, life skill and social skill deficiencies, and characterological defects such as anger, aggression, and impulsivity. Currently MDOC 's risk assessment consists of screening all offenders for property and

assaultive risk at the reception facilities using the Property Risk Screen and
Assaultive Risk Screening Sheet. As appropriate, the reentry program will use one
of three reliable and valid risk assessment instruments such as Level of Service
Inventory-Revised (LSI-R), Correctional Offender Management Profiling for
Alternative Sanctions (COMPAS), and Risk of Reconviction (ROC) and
Criminologic Needs Inventory (CNI). The assessment tools at minimum will
provide information on criminal behavior, likelihood of recidivism, and the success
of rehabilitative programs.

E. System of Offender Reentry Plans

The offender reentry plans called Individual Reentry Plan will act as a "guide book" for the offender, institution, transition team, and community reentry authority. The Individual Reentry Plan (IRP) will be developed upon enrollment of the offender into the MRI-WWM program by the offender, institution, and transition team. Components of the IRP is based on the system for offender assessments which identifies Risk and Needs of the offender. Minimally, the IRP will contain:

- Institutional, Transitional, and Sustainability goals and objectives;
- Supportive services to address life skills, stress/anger management,
 education, employment, mental health and/or substance abuse treatment,
 legal issues, housing;
- Restorative Justice;
- Definite terms and conditions.

E. Continuum of Supervision

All paroled offenders will receive supervision through electronic monitoring upon release from prison. The Community Reentry Authority will provide supervision through case management, parole officers, and partnerships with local law enforcement and judicial entities. Graduated levels of supervision will occur with intensive and highly structured supervision that monitors activities and then decreases to less intensive supervision levels as the paroled offender maintains compliance with the IRP and terms and conditions of release. There is a zero tolerance level for offenders to recommit crime so supervision may be intensified or reduced based on the offender's behavior. Additionally, supervision may include curfews, restraining orders, residency orders, civil protection orders, and mandatory drug testing.

F. Continuity of Services

• Restorative Justice

This includes restitution to victim and community reparation. The MRI-WWM will work with Victims Rights organizations to agree upon services offenders can provide to work towards restitution. MDOC has a program Restoring Justice with Community Service that offenders will participate in that includes work assignments in the community.

Educational Services

MDOC has educational programs that provides formal education such as Adult Basic Education, career and technical education, General Educational Development. Additional educational services in other phases will include Michigan Works! One Stop/centers, Wayne County Community College District, and Focus: Hope Institute, and CareerWorks.

• Housing

Transitional Housing Services provided by Project Rehab/Community

Treatment Centers refers to a less restrictive residential program, which allows participants the flexibility to work and interact in their home communities while continuing to benefit from the structure and programming provided in the residential setting. This program consists of options for individuals who are transitioning out of prison with or without involvement in a substance abuse treatment program. Program eligibility will be coordinated by the Transitional Services Coordinator who will serve as part of the Management Team. The program will be staffed with a coordinator and assistant for client monitoring and supervision of housing rules and program compliance. Maintenance staff will also be allocated to maintain property repairs. Monitoring for substance abuse will also be coordinated for random checks by program staff and/or supervising authority (i.e. P.O.).

• Job Training and Placement Services

The Detroit Employment and Training Department organizes and administers the Detroit Workforce Development system. Currently, the system includes five One-Stop Career Centers, one satellite center with youth services, and a network of almost 70 employment service providers. The Employment and Training Department is committed to working with MDOC representatives and the Reentry Initiative Transition Team to ensure that ex-offenders have

seamless access to its wide variety of services. Services offered at one or more of the One-Stop Centers include: Workforce Investment Act adult and youth services; Job Corps; Detroit Entrepreneurship Institute; Wayne County Legal Services (housing); Child Care Coordinating Council; Marygrove College (remediation, GED, testing); child care centers; and a substance abuse assessment and referral service.

• Substance Abuse Services

MDOC has substance abuse services for offenders assessed to need those services while incarcerated. Partners of the MRI-WWM program provide substance abuse services for all phases of the initiative based on treatment modalities needed by the offender. Treatment modalities include outpatient, intensive outpatient, day treatment, and residential treatment. Additionally, relapse prevention will be a key component in the IRP for offenders completing treatment in any of the program phases. Using community resources, MDOC will provide relapse prevention opportunities to participate specifically targeting relapse & anger/stress management.

• Mental Health Services

MDOC provides mental health services for offenders experiencing serious mental health illness. The Community Reentry Authority has providers located inside the One Stop Shops to provide mental health services as well. Paroled offenders needing mental health services will be referred to appropriate providers who can provide effective treatment that includes regular screening and assessments with appropriate follow-up.

• Other Appropriate Support Services and Resources

The MRI-WWM program has collaborated with Family Independence Agency (FIA) to provide support services to paroled offenders. FIA has agreed to designate a site for offenders enrolled in the reentry program to receive needed services such as Temporary Assistance for Needy Families (TANF), food stamps, and/or Medicaid insurance. Additional support services include TransNet – providing specialized transportation services for program participants that includes coordination and training, C.O.P.E. Personal Development- provides family preservation and reunification services, and the Samaritan Center – provides medical care for low income and special populations. Fathers Helping Fathers, Inc. – provide paternal parenting skills.

H. Definite Terms and Conditions

Eligible participants are required to comply with mandatory terms of the MRI-WWM program which include:

- * Formation and implementation of Individual Reentry Plan;
- * Remaining drug-free (following treatment if applicable);
- * Committing to and performing restitution to victim and community reparation; * Achieving program goals such as obtaining employment, family remediation, supervised housing, electronic monitoring, and counseling;
- * Complying with zero tolerance for recurrence of crime/illegal activity; and
- * Attending regular appointments with community reentry authority and case manager for progress updates, tracking, and compliance.

I. Plan for Program Sustainability

MDOC along with reentry initiative partners and community organizations have a myriad of resources to sustain the MRI-WWM. Ideally, when additional funding becomes available, MDOC would like to expand this initiative to other heavily populated counties where offenders frequently return.

Leveraging and sharing of resources will occur with agencies who have received funding for reentry programs such as CareerWorks and Focus: Hope Skilled Machinist. CareerWorks provides education, hands on training and job placement services to Detroit City residents ages 18-21 to enable them to compete for employment opportunities and reach their full potential. Focus: Hope is a Detroit program that organizes classes, offers training in precision, machining and metal working, provides job counseling/placement, and on the job training that will help individuals to achieve goals and objectives.

Additional sources of funding that will sustain the MRI-WWM are:

- Weed and Seed Program
- Edward Byrne Memorial State and Local Law Enforcement Assistance
 Discretionary Grants Program
- Public Safety Partnership and Community Policing Grants
- Block Grants for Prevention and Treatment of Substance Abuse
- Community Access Program
- Community-Based Family Resource and Support Grants
- Block Grants for Community Mental Health Services

- Demonstration Cooperative Agreements for Development and Implementation of Criminal Justice Treatment Networks
- Job Opportunities for Low-Income Individuals
- Promoting Safe and Stable Families
- Community Development Block Grants/Special Purpose Grants/Technical Assistance Program
- Community Development Block Grants/State's Program
- Federally Assisted Low-Income Housing Drug Elimination
- New Approach Anti-Drug Grants
- Officer Next Door Sales Program
- Adult Education State Grant Program
- Rehabilitation Services Vocational Rehabilitation Grants to States
- Vocational Education Basic Grants to States
- Supportive Housing Program

J. Staff Resources

Staffing resources will be allocated specifically to serve the collaborative effort in all three phases of the MRI-WWM program. Every effort will be made to transition the offender from commitment to community with needed resources and programs that will reduce recidivism and protect public safety. This transition will consist of interagency staffing among decision makers and/or resources in designated areas of expertise. The staff of the transition team is instrumental in providing services and resources in areas of housing, substance abuse and mental

health treatment, family remediation, victim restitution, employment, and transportation for the offender during incarceration and after release.

The Community Reentry Authority (WOF) will develop a working relationship with assigned parole officers through the MDOC case management system. MRI-WWM case managers, in cooperation with the school principals (institutional management team), will provide orientation, assessments, and family reentry support for program participants during the institution phase and on-going feedback will occur among MDOC and MRI-WWM staff to ensure the paroled offender is compliant with his or her Individual Reentry Plan.

More importantly, staffing resources will include community phase staff providing services while offenders are in the institutional phase, and institutional staff providing services for the same offenders during the community phase. This process of phase overlapping and interagency staffing may build rapport and promote compliance by providing services from familiar staff during the transition from commitment to community. Additionally, it will demonstrate to the offender, a united and coordinated system for zero tolerance between the institution and community.

K. Information Sharing/Data Collection

Data collection will be initiated during Phase I (0-9 months) using MDOC's prisoner information data system. The system keeps extensive data on offenders and can query needed information to share with case managers, transition team, and interdepartmental staff. As the offender prepares for transition to the community, appropriate contacts and information sharing is facilitated through the

referral process. The last quarter of Phase I (9-12 months) will involve overlap of staff from Phase II to gather data and provide case management utilizing Kid Smart Case Manager 2000. Kid Smart is a technology-based case management system that assists with intake and assessments of program participants during Phase II the community phase. This information can be shared electronically with MDOC, Employment and Training Department, and transition team members. MDOC in collaboration with its partners will produce a promotional videotape about the MRI-WWM program. The community liaison will be responsible for sharing information with service providers (including faith-based organizations) and the general public via brochures, community forums, and news updates.

4.1 Phase I: Institutionally Based Programs

Transition Team

The transition team consists of: The prisoner, community reintegration specialist, treatment specialists (mental health and substance abuse), mentor, support person or family member, parole officer, and school principle.

Prisoners take the initiative to register for the program and agree to actively participant and work toward the achievement of identified goals and self-sufficiency.

The prisoner will be actively involved in sharing accountability for success through participation in clearly defined goals and objectives that the prisoner has helped to identify. The prisoner and transition team members regularly review successes through the use of the MDOC's Education Program Plan (individualized program plan). Throughout each phase of the program, participants will have a set of goals to accomplish (i.e., In Phase I - completion

of Building Trades courses and obtaining certification; Phase II – Participate in treatment/relapse; Phase III – Maintain long-term employment and/or housing).

- Needs/Risk Assessment
 This section contained sufficient information.
- Institutional Programs/Services
 This section contained sufficient information.

3.1 Phase II: Community-Based Transition

Reentry Authority

All aspects of this phase will be done through a collaborative approach between Wings of Faith and MDOC administration. Parole agents assigned to participants (parolees) in the MRI-WWM program will have ultimate authority over all stipulations and conditions that involve the participant's parole. Wings of Faith, Inc. and assigned parole agents are responsible for day-to-day monitoring.

Continuum of Services

Several gaps exist with the Michigan ex-offender population. Gaps that were identified through the Michigan Reentry workgroup were: Housing, Mental Health and Substance Abuse Treatment; Employment, Transportation, Medical Care; Food and Clothing; Childcare; and Family Reunification. The Michigan Reentry Initiative "Walk With Me" Program will address these gaps and is working with community partners and key decision makers to leverage existing resources. Current key decision makers that will address the majority

of the gaps are Detroit Employment and Training, City of Detroit Mayor and staff, Family Independence Agency, Community Rehab Centers, and other community agencies.

The MRI-WWM Program will work with existing federal/community resources to coordinate services for paroled participants and seek additional resources and/or funding to support gaps from the following:

The Department of Labor will be utilized for community referrals on behalf of all participants through its five Detroit One-Stop Career Centers. The One-Stop Career Centers will provide career development, assessment and job placement activities to prepare all participants for job services and/or employment referrals. Other opportunities in the One-Stop environment include summer employment, life skills, mentoring opportunities and on-the-job-training avenues with prospective employers.

The Department of Labor initiatives will involve educating the business/employer community about incentives designed to profit employers in hiring parolees based on skill. Employer forums and workshops will be designed to educate employers about bonding, enterprise/empowerment zone and other tax credits. Program participants will develop portfolios that include resumes, pictures of participants, tax credit information and bonding information available to each employer. Marketing and employer partnerships will be designed to include the MRI-WWM Program and Employer Logos on common literature expressing collaboration efforts promoting both entities intent of making this reentry project successful. A community resource lab for

this population and their families will be established to assist with job searches, employer job orders and other technology to enhance chances of employment.

An on-site employment instructor and job developer will facilitate services through each phase.

Youth parolees between the ages of 18-21 will not only receive instructional guidance through the One Stop environment, but will also be referred through the local Workforce Investment Act (WIA) youth opportunities which are designed to help low-income youth to obtain adequate educational and occupational skills training.

Projects will be used to foster initiatives and incentives for business ownership by individuals who are both socially and economically disadvantaged.

Additional incentives will be designed to aid participants in specific occupational skills training that will ensure community and employer safety.

In addition, community collaborations have been established with the Detroit Employment and Training Department where on-going technical assistance is given to the MRI-WWM Program. Based on its expectations, its commitment (see MOU attached) and its desire to aid and assist this reentry project, the Detroit Employment and Training Department has included the MRI-WWM's Program Director as a member of its "Transitional Jobs Team" which is designed to provide work incentives and place the offender population and other hard-to-serve populations into sustainable employment.

The MRI-WWM Program will refer parolees who live in Detroit's

Empowerment Zone to the EZ area referrals (housing, job and community)

referral opportunities). In addition, special federally funded programs that provide assistance to parolees who are between the ages of 18-21 will be referred to the Detroit Opportunity Movement (YO!) Program that provide job development, GED preparation, mentoring, substance abuse and mental health referrals.

The Department of Veterans Affairs will provide services for veterans identified through the MRI-WWM Program and will refer participants to the local Michigan Career Development Department to receive veterans services which are designed to aid and assist veterans in meeting their needs of employment, housing and training. Additional services such as referrals for substance abuse and mental health counseling will also be incorporated.

Additional funds will be sought to support programs available to youth who have parents who are veterans. This program will also assist youth and families in health care, job training, community reintegration, and family counseling/reunification. Additionally, under the auspices of this department there is a myriad of opportunities available for veterans who need housing, vocational and/or rehabilitation assistance. This connection will strengthen families by providing much needed assistance to youth who have parents/guardians that meet these criteria.

The Department of Education services and referrals will be used to cultivate much needed tutorial services for individuals and their families to obtain GED and other educational components to sustain employment opportunities. Other existing resources available through the Department of Education will include

GED programs; local community colleges and other community organizations focusing on higher education which would include job placement. Funds will be used to initiate projects for incarcerated participants to obtain literacy and employment services prior to release. As a crucial program component, the MRI-WWM Program will continuously utilize existing community partners who are currently funded by the Department of Education.

To assist in delivering comprehensive services to all participants and their families, The Department of Agriculture funds local food stamp programs that improve the nutrition of low-income households by increasing their ability to purchase healthy food. The MRI-WWM Program will also work to build and develop social and recreational opportunities toward physical fitness, which enables individuals to maintain family and work environments by maintaining good health. The Department of Agriculture offers a supplemental nutritional program for Women and Children (WIC) that MRI-WWM Program will utilize for youth that meet the program criteria.

The Department of Commerce will be utilized to address local tourism activities and long-term economic development in our communities. The Department of Commerce also assists in the construction of public works and development facilities needed for initiating and supporting the creation or retention of permanent jobs in the private sector in areas experiencing substantial economic distress (i.e. Wayne County). Funding will enable employment and training opportunities that will strengthen participant's appreciation of its community and history as well as provide knowledgeable trainees to the tourist industry.

Funding from The Department of Health and Human Services will be used in a unique collaborative effort between the MRI-WWM Program to facilitate healthy relationships between parents of incarcerated participants and their children. For example, a collaboration has been established with The MRI-WWM Program and Family Independence Agency (Wayne County) who have referred serious and violent youth offenders ages 14-21 for mentoring services and if a youth has a parent that is incarcerated, a match will be developed between this youth and the "absent" parent to increase the likelihood of a continued relationship. This reconnection will also aid in nurturing the emotional bond and positive parenting skills, as well as the collection of any arrearage of past child support, and the establishment and formalization of paternity and medical support. Work done in this area will develop and strengthen the family unit. The City of Detroit also maintains a number of Community Health Centers that will offer services to our youth and their families. The MRI-WWM Program will utilize these centers to provide prevention and primary health care services, supplemental health and support services and environmental health services to medically undeserved areas/population. Additional funding will be sought for an on-sight health awareness center that focuses on providing community/families information and protective measures on all areas of health.

The Department of Housing and Urban Development works to assure stable, affordable and safe housing. A primary focus of this re-entry initiative is to assure that when participants are released from their residential placement, they

will have a viable, community-based housing option by utilizing Community Development Block Grants/Entitlement Grants and Federally Assisted Low-Income Housing Drug Elimination programs. The MRI-WWM Program is also aware that the Housing Opportunities for Persons with AIDS (HOPWA) Programs and has projects that benefit low-income persons medically diagnosed with HIV/AIDS and their families.

The Department of Justice funds will be utilized for data collection, an assessment and Welcoming Home office space to operate its service with its main purpose of reducing recidivism and ensuring public safety. The Bureau of Justice Assistance also offers Local Law Enforcement Block Grants that can be procured to provide funding for private or nonprofit entities/community-based organizations to carry out the purposes of the grant, which are to prevent and/or reduce crime and improve public safety.

The Social Security Administration will support caregivers that are not able to provide support for their family members. The social security disability insurance will help to replace earnings that may have been lost due to a caregiver being unable to provide. These supports are designed to aid in transition and to assist those who are unable to care for youth that are reentering their communities.

The Small Business Administration funds will be used to foster initiatives for business ownership. Participants will be provided training in diverse areas of entrepreneurship opportunities to run their own establishments. Projects will also be developed to train individuals to run a graphics design/copy center,

medical billing center and other initiatives where participants can run each project in addition to providing some sustainability to The MRI-WWM Program for future projects.

2.1 Phase III: Community-Based Long-Term Support

· Self Sufficiency Planning

There is an extensive case management system in place that will track client progress over time. The case management system (CaseManager 2000) includes software for a computer-based component that allows program case managers to record information, revise the Individual Reentry Plans, and document progress of participants in completing goals and moving towards self-sufficiency.

The use of comprehensive assessment tools for participants used by MDOC, Parole agents, and Wings of Faith will document and track progress towards self sufficiency and goal completion. Program participants will also be involved in independent living skills training during Phases I and II which will promote self-sufficiency.

Long-Term Service Agreements
 No comments listed for this section in the Grant Review Summary Sheet:
 Areas Requiring Clarification in the Grantee Workplan.

6. Organize Project Management

· Program Coordination

Michigan Department of Corrections will increase the likelihood of success in designing, implementing, and operating multi-system program

through a strategic planning process. MDOC will collaborate with all state and local key decision makers and community agencies to promote productive planning for this Reentry Initiative. The productive planning process will focus on the most critical problems, choices and opportunities.

With strategic planning, MDOC will be able to resolve interrelated sets of issues or problems in an intentional and coordinated manner with groups involved.

Required steps of strategic planning will be:

- > Getting Organized
- **▶** Taking Stock
- > Setting Direction
- > Refining and Adopting Plans
- > Implementation of Plans

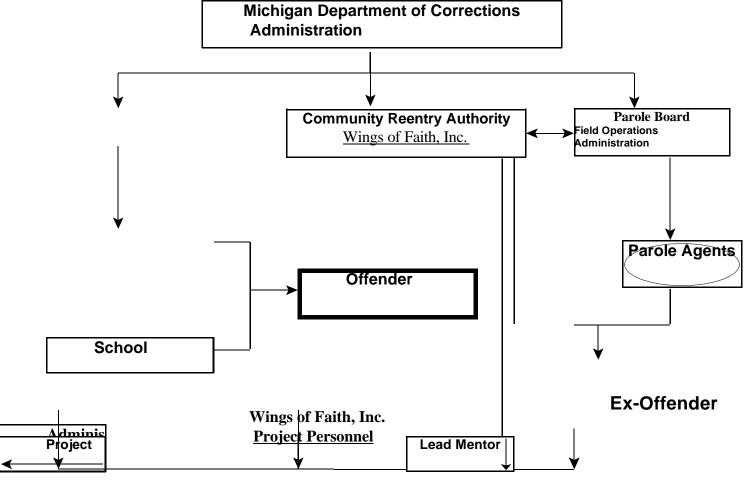
Additionally, several principals will be utilized:

- > Building social capital
- > Strengthen civic infrastructure
- *▶ Mobilize community assets*
- **▶** Collaborate
- > Act based on vision

As noted below in the organizational chart, the project personnel will include current MDOC staff such as School Principals, Wardens, Transition Team Representatives, and FOA staff during Phase I of the program. Project personnel that will be involved with part of Phase I (months 9-12) and all of Phase II and Phase III will be a Project Manager, Community

Liaison/Resource Developer, Employment/Marketing Developer, Case

Managers (2), Lead Mentor, and Administrative Assistant. The chart on the
following page demonstrates organization of the project personnel for the
Michigan Reentry Initiative "Walk With Me" Program.





Administrative Assistant

Lead Case Manager

Case

7. Develop Project Budget

- Budget
 This section contained sufficient information.
- · Sustainability
 This section contained sufficient information.